Case 13-10200-bii D0	.C / FIIEU 09/19/.	13 Ellielen 09/19/13 11.51.55 Dest Mail
	Document .	Page 1 of 8
B22C (Official Form 22C) (Chapter 13)	(12/10)	According to the calculations required by this statement:
		☐ The applicable commitment period is 3 years.
In re: WRIGHT, LYNN DENISE		\checkmark The applicable commitment period is 5 years.
Debtor(s)		▼ Disposable income is determined under § 1325(b)(3).

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

Disposable income is not determined under § 1325(b)(3).

(Check the boxes as directed in Lines 17 and 23 of this statement.)

In addition to Schedules I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Part I. REPO	ORT OF INCOME			
		rital/filing status. Check the box that applies and c Unmarried. Complete only Column A ("Debto") Married. Complete both Column A ("Debtor")	or's Income") for Lines 2-10.			
1	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, yo must divide the six-month total by six, and enter the result on the appropriate line.			De	lumn A ebtor's ncome	Column B Spouse's Income
2				\$	5,873.08	\$
3	a an one attac	ome from the operation of a business, profession, denter the difference in the appropriate column(s) business, profession or farm, enter aggregate number the chiment. Do not enter a number less than zero. Do not enter a number less than zero. Do not enter a deduction in Part IV	of Line 3. If you operate more than ers and provide details on an ot include any part of the business			
	a.	Gross receipts	\$			
	b.	Ordinary and necessary operating expenses	\$			
	c.	Business income	Subtract Line b from Line a	\$		\$
4	diffe not	t and other real property income. Subtract Line because in the appropriate column(s) of Line 4. Do n include any part of the operating expenses enter t IV.	ot enter a number less than zero. Do			
·	a.	Gross receipts	\$			
	b.	Ordinary and necessary operating expenses	\$			
	c.	Rent and other real property income	Subtract Line b from Line a	\$		\$
5	Inte	rest, dividends, and royalties.		\$		\$
6	Pen	sion and retirement income.		\$		\$
7	expo that by the	amounts paid by another person or entity, on a enses of the debtor or the debtor's dependents, in purpose. Do not include alimony or separate main ne debtor's spouse. Each regular payment should be ment is listed in Column A, do not report that paym	ncluding child support paid for itenance payments or amounts paid e reported in only one column; if a	\$		\$

Case Number: _

(If known)

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8	Unemployment compensation. Enter However, if you contend that unemplo was a benefit under the Social Security Column A or B, but instead state the a	yment compensation receive Act, do not list the amoun	ed by you	or your spouse	_			
	Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$	Spouse S	\$	<u> </u>		\$	
9	Income from all other sources. Specisources on a separate page. Total and a maintenance payments paid by your or separate maintenance. Do not include Act or payments received as a victim of international or domestic terrorism. a. b.	enter on Line 9. Do not inc spouse, but include all of lude any benefits received u	lude alim ther paym ander the S	ony or separate nents of alimony Social Security	7		\$	
10	Subtotal. Add Lines 2 thru 9 in Colum through 9 in Column B. Enter the total		ompleted,	add Lines 2	\$	5,873.08	\$	
11	Total. If Column B has been complete and enter the total. If Column B has no Column A.				\$			5,873.08
	Part II. CALCUL	ATION OF § 1325(b)(4	I) COMI	MITMENT PI	ERIOI)		
12	Enter the amount from Line 11.						\$	5,873.08
13	Marital Adjustment. If you are marri that calculation of the commitment per your spouse, enter on Line 13 the amo a regular basis for the household experbasis for excluding this income (such a persons other than the debtor or the de purpose. If necessary, list additional adajustment do not apply, enter zero. a. b.	niod under § 1325(b)(4) does unt of the income listed in larger ses of you or your dependents as payment of the spouse's btor's dependents) and the	es not requestine 10, Cents and spetax liability	column B that was pecify, in the linery or the spouse's f income devoted	the inclusion of the in	ome of paid on w, the ort of h		
	c.			\$				
	Total and enter on Line 13.						\$	0.00
14	4 Subtract Line 13 from Line 12 and enter the result.						\$	5,873.08
15	Annualized current monthly income 12 and enter the result.	for § 1325(b)(4). Multiply	the amou	ınt from Line 14	by the		\$	70,476.96
16	Applicable median family income. E household size. (This information is at the bankruptcy court.)					rk of		
	a. Enter debtor's state of residence: Pe	nnsylvania	b. Ente	er debtor's house	ehold si	ze: _1_	\$	45,092.00
17	Application of § 1325(b)(4). Check th ☐ The amount on Line 15 is less th ☐ 3 years" at the top of page 1 of the ☐ The amount on Line 15 is not less	an the amount on Line 16 is statement and continue was than the amount on Lin	Check the children that this state that the children that the chil	ne box for "The atement. ck the box for "	Гhe app			-
	period is 5 years" at the top of page					E INCOM	Œ	

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18	Enter the amount from Line 11.					\$	5,873.08
19	Marital adjustment. If you are mar total of any income listed in Line 10, expenses of the debtor or the debtor' Column B income (such as payment than the debtor or the debtor's dependencessary, list additional adjustments not apply, enter zero. a. b.	, Column B that v 's dependents. Spo of the spouse's tandents) and the an	vas NO ecify in ax liabil nount o	T paid on a regular basis for the lines below the basis for lity or the spouse's support of f income devoted to each pu	the household r excluding the of persons other rpose. If		
	c.				\$		
	Total and enter on Line 19.					\$	0.00
20	Current monthly income for § 132	5(b)(3). Subtract	Line 19	9 from Line 18 and enter the	result.	\$	5,873.08
21	Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result.						70,476.96
22	Applicable median family income. Enter the amount from Line 16.						45,092.00
	Application of § 1325(b)(3). Check ✓ The amount on Line 21 is more under § 1325(b)(3)" at the top of	e than the amou	nt on L	•			
23	The amount on Line 21 is not a determined under § 1325(b)(3)" complete Parts IV, V, or VI.						
23	The amount on Line 21 is not a determined under § 1325(b)(3)" complete Parts IV, V, or VI.	at the top of page	e 1 of th		art VII of this state		
23	The amount on Line 21 is not a determined under § 1325(b)(3)" complete Parts IV, V, or VI. Part IV. CALCULAT	at the top of page	UCTI	nis statement and complete F	ER § 707(b)(2)		
23 24A	The amount on Line 21 is not a determined under § 1325(b)(3)" complete Parts IV, V, or VI. Part IV. CALCULAT	TION OF DED tions under Stan and services, ho e "Total" amount of persons. (This rt.) The applicabl	UCTI dards of the state of the	ONS ALLOWED UNDI of the Internal Revenue Se eping supplies, personal ca RS National Standards for A ation is available at www.us per of persons is the number	ER § 707(b)(2) rvice (IRS) re, and allowable Living doj.gov/ust/ or that would		
	The amount on Line 21 is not a determined under § 1325(b)(3)" complete Parts IV, V, or VI. Part IV. CALCULATE Subpart A: Deduct National Standards: food, apparel miscellaneous. Enter in Line 24A th Expenses for the applicable number from the clerk of the bankruptcy coucurrently be allowed as exemptions of dependents whom you support. National Standards: health care. E Out-of-Pocket Health Care for perso Out-of-Pocket Health Care for perso www.usdoj.gov/ust/ or from the clerk persons who are under 65 years of ag years of age or older. (The applicable category that would currently be allowed and additional dependents whom a persons under 65, and enter the result persons 65 and older, and enter the result amount, and enter the result in Line 2	TION OF DED tions under Stan and services, ho e "Total" amount of persons. (This rt.) The applicabl on your federal in Enter in Line a1 be ns under 65 years ns 65 years of age k of the bankrupte ge, and enter in Le e number of perso you support.) Mu lt in Line c1. Mul esult in Line c2.	dards of the dards of the come to the come	ONS ALLOWED UNDI of the Internal Revenue Se eping supplies, personal ca RS National Standards for A ation is available at www.us ber of persons is the number of ax return, plus the number of the amount from IRS National c, and in Line a2 the IRS National der. (This information is available at policiable number of persons is the number of persons is the number of persons in the applicable number of persons is the number of persons in the applicable number of persons in the applicable number of persons age category is the number of persons in the allowed person	rvice (IRS) re, and Allowable Living doj.gov/ust/ or that would any additional Standards for ional Standards for lable at cable number of sons who are 65 ber in that n, plus the number a total amount for total amount for	\$	Do not
24A	The amount on Line 21 is not a determined under § 1325(b)(3)" complete Parts IV, V, or VI. Part IV. CALCULATE Subpart A: Deduct National Standards: food, apparel miscellaneous. Enter in Line 24A th Expenses for the applicable number from the clerk of the bankruptcy coucurrently be allowed as exemptions of dependents whom you support. National Standards: health care. From the clerk of the lath Care for person out-of-Pocket Health Care for person out-of-Pocket Health Care for person www.usdoj.gov/ust/ or from the clerk persons who are under 65 years of ag years of age or older. (The applicable category that would currently be allowed any additional dependents whom you support.	TION OF DED tions under Stan and services, ho e "Total" amount of persons. (This rt.) The applicabl on your federal in Enter in Line a1 be ns under 65 years ns 65 years of age k of the bankrupte ge, and enter in Le e number of perso you support.) Mu lt in Line c1. Mul esult in Line c2.	dards of the dards of the come to the come	ONS ALLOWED UNDI of the Internal Revenue Se eping supplies, personal car RS National Standards for A ation is available at www.us ber of persons is the number ax return, plus the number of the amount from IRS National a, and in Line a2 the IRS National ber. (This information is available.) Enter in Line b1 the applicate applicable number of persons age category is the num our federal income tax retur tine a1 by Line b1 to obtain tine a2 by Line b2 to obtain a	rvice (IRS) re, and Allowable Living doj.gov/ust/ or that would any additional Standards for ional Standards for lable at cable number of sons who are 65 ber in that n, plus the number a total amount for total amount for	\$	Do not
24A	The amount on Line 21 is not a determined under § 1325(b)(3)" complete Parts IV, V, or VI. Part IV. CALCULATE Subpart A: Deduct National Standards: food, apparel miscellaneous. Enter in Line 24A th Expenses for the applicable number from the clerk of the bankruptcy coururently be allowed as exemptions of dependents whom you support. National Standards: health care. Fout-of-Pocket Health Care for perso Out-of-Pocket Health Care for perso www.usdoj.gov/ust/ or from the clert persons who are under 65 years of agyears of age or older. (The applicable category that would currently be allowed any additional dependents whom y persons under 65, and enter the result persons 65 and older, and enter the ramount, and enter the result in Line 2	at the top of page FION OF DED tions under Stan and services, ho e "Total" amount of persons. (This rt.) The applicabl on your federal in Enter in Line a1 be ns under 65 years ns 65 years of age k of the bankrupte ge, and enter in Le e number of perso you support.) Mu let in Line c1. Mul esult in Line c2. A 24B.	dards of the UCTI dards of the transfer of the	ONS ALLOWED UNDI of the Internal Revenue Se eping supplies, personal ca RS National Standards for A ation is available at www.us per of persons is the number of ax return, plus the number of the amount from IRS National a, and in Line a2 the IRS National the applicable number of persons is the number of the applicable number of persons is the num our federal income tax returnine a1 by Line b1 to obtain the a2 by Line b2 to obtain a mes c1 and c2 to obtain a total ons 65 years of age or olde	rvice (IRS) re, and allowable Living doj.gov/ust/ or that would any additional Standards for ional Standards for lable at cable number of sons who are 65 ber in that n, plus the number a total amount for total amount for all health care	\$	Do not

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25A	and U	the amount of the IRS Housing and family size. (This kruptcy court). The applicable aptions on your federal income t.	\$	485.00	
25B	the II information famile tax read the A	I Standards: housing and utilities; mortgage/rent expense. Enter, it RS Housing and Utilities Standards; mortgage/rent expense for your comation is available at www.usdoj.gov/ust/ or from the clerk of the bandy size consists of the number that would currently be allowed as exemple turn, plus the number of any additional dependents whom you support werage Monthly Payments for any debts secured by your home, as startline a and enter the result in Line 25B. Do not enter an amount less	bunty and family size (this kruptcy court) (The applicable aptions on your federal income t.); enter on Line b the total of ted in Line 47; subtract Line b		
	a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$ 1,454.00		
	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47	\$ 1,198.59		
	c.	Net mortgage/rental expense	Subtract Line b from Line a	\$	255.41
26	for ye	our contention in the space below:		\$	
	an ex	l Standards: transportation; vehicle operation/public transportat pense allowance in this category regardless of whether you pay the exegardless of whether you use public transportation.		Ψ	
	expe	k the number of vehicles for which you pay the operating expenses or uses are included as a contribution to your household expenses in Line			
27A					
		$\boxed{1}$ 2 or more.			
	If you Trans Loca Statis	☐ 2 or more. u checked 0, enter on Line 27A the "Public Transportation" amount freportation. If you checked 1 or 2 or more, enter on Line 27A the "Ope I Standards: Transportation for the applicable number of vehicles in the stical Area or Census Region. (These amounts are available at <a amount="" applicable="" from="" href="www.useen.ncm.ncm.ncm.ncm.ncm.ncm.ncm.ncm.ncm.nc</td><th>rating Costs" irs="" metropolitan<="" ne="" th=""><td>\$</td><td>299.00</td>	\$	299.00	

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whicl				
v 1	2 or more.			
Trans	sportation (available at www.usdoj.gov/ust/ or from the clerk of the babtal of the Average Monthly Payments for any debts secured by Vehic	ankruptcy court); enter in Line b le 1, as stated in Line 47;		
a.	IRS Transportation Standards, Ownership Costs	\$ 496.00		
b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47	\$		
c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a	\$	496.00
Enter Trans	seed the "2 or more" Box in Line 28. The control of the "Ownership Costs" for "One Car" from the IRS sportation (available at www.usdoj.gov/ust/ or from the clerk of the bastal of the Average Monthly Payments for any debts secured by Vehic	Local Standards: ankruptcy court); enter in Line b le 2, as stated in Line 47;		
a.	IRS Transportation Standards, Ownership Costs	\$		
b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$		
c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a	\$	
feder	al, state, and local taxes, other than real estate and sales taxes, such as	income taxes, self-employment	\$	1,683.06
dedu	ctions that are required for your employment, such as mandatory retire	ement contributions, union dues,	\$	
for te	erm life insurance for yourself. Do not include premiums for insurar		\$	100.00
requi	red to pay pursuant to the order of a court or administrative agency, so	uch as spousal or child support	\$	
Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.				
Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.				
Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in				
you a servi neces	actually pay for telecommunication services other than your basic home ce—such as pagers, call waiting, caller id, special long distance, or interesting for your health and welfare or that of your dependents. Do not in	te telephone and cell phone ternet service—to the extent	\$	
	which than the to subtract the	which you claim an ownership/lease expense. (You may not claim an owner than two vehicles.) 1 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Transportation (available at www.usdoj.gov/ust/ or from the clerk of the be the total of the Average Monthly Payments for any debts secured by Vehic subtract Line b from Line a and enter the result in Line 28. Do not enter a a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle 1, as be stated in Line 47 c. Net ownership/lease expense for Vehicle 1 Local Standards: transportation ownership/lease expense; Vehicle 2. Cehecked the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Transportation (available at www.usdoj.gov/ust/ or from the clerk of the be the total of the Average Monthly Payments for any debts secured by Vehicle subtract Line b from Line a and enter the result in Line 29. Do not enter a a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly expense federal, state, and local taxes, other than real estate and sales taxes, such as taxes, social-security taxes, and Medicare taxes. Do not include real estate of the Necessary Expenses: involuntary deductions for employment. Edductions that are required for your employment, such as mandatory retire and uniform costs. Do not include discretionary amounts, such as volund Other Necessary Expenses: life insurance. Enter total average monthly for term life insurance for yourself. Do not include premiums for insurary whole life or for any other form of insurance. Other Necessary Expenses: education for employment or for a physical child. Enter the total average monthly amount that you actually expend for employm	which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) ☑ 1 □ 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoi.gov/usc or from the clerk of the bankruptcy court; enter in Line b the total of the Average Monthly Payments for any dobts secured by Vehicle 1, as stated in Line 47, subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs b. Standards: Monthly Payment for any debts secured by Vehicle 1, as \$ \$ \$ 496.00 Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoi.gov/usc/ or "One Car" from the IRS Local Standards: Transportation (available at www.usdoi.gov/usc/ or "One Car" from the IRS Local Standards: Transportation (available at www.usdoi.gov/usc/ or "One Car" from the IRS Local Standards: Transportation (available at www.usdoi.gov/usc/ or "One Car" from the IRS Local Standards: Transportation (available at www.usdoi.gov/usc/ or "One Car" from the IRS Local Standards: Transportation (available at www.usdoi.gov/usc/ or "One Car" from the IRS Local Standards: Transportation (available at www.usdoi.gov/usc/ or "One Car" from the IRS Local Standards: Transportation (available at www.usdoi.gov/usc/ or "One Car" from the IRS Local Standards: Transportation for from the clerk of the bankruptcy courty; enter in Line to the total of the total awerage monthly Paymen	which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)

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38	Tota	l Expenses Allowed under IRS Standards. Enter the total	of Lines 24 through 37.	\$ 3,912.47
		Subpart B: Additional Expense De Note: Do not include any expenses that y		
	expe	Ith Insurance, Disability Insurance, and Health Savings and the categories set out in lines a-c below that are reas se, or your dependents.		
	a.	Health Insurance	\$	
	b.	Disability Insurance	\$	
39	c.	Health Savings Account	\$	
	Tota	l and enter on Line 39		\$
		ou do not actually expend this total amount, state your act pace below:	tual total average monthly expenditures in	
40	Con mon elder	tinued contributions to the care of household or family not the payer of the reasonable rely, chronically ill, or disabled member of your household or le to pay for such expenses. Do not include payments liste	e and necessary care and support of an member of your immediate family who is	\$
41	you a Serv	ection against family violence. Enter the total average reast actually incur to maintain the safety of your family under the ices Act or other applicable federal law. The nature of these idential by the court.	e Family Violence Prevention and	\$
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS			\$
43	actua seco	cation expenses for dependent children under 18. Enter the ally incur, not to exceed \$147.92 per child, for attendance at an and ary school by your dependent children less than 18 years are tee with documentation of your actual expenses, and you	a private or public elementary or of age. You must provide your case	
		asonable and necessary and not already accounted for in		\$
44	Add cloth		monthly amount by which your food and clothing (apparel and services) in the IRS nces. (This information is available at	\$
	Add cloth Nation www addi	asonable and necessary and not already accounted for initional food and clothing expense. Enter the total average sing expenses exceed the combined allowances for food and conal Standards, not to exceed 5% of those combined allowards, usdoj.gov/ust/ or from the clerk of the bankruptcy court.) It tional amount claimed is reasonable and necessary. The initial contributions in the form of cash or financial instrume in U.S.C. § 170(c)(1)-(2). Do not include any amount in excessions in the form of cash or financial instruments.	monthly amount by which your food and clothing (apparel and services) in the IRS nces. (This information is available at You must demonstrate that the ary for you to expend each month on ents to a charitable organization as defined	

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		S	Subpart C	: Deductions for D	ebt Payment		
	you o Payn the to follo	own, list the name of the creditor nent, and check whether the payr otal of all amounts scheduled as a wing the filing of the bankruptcy . Enter the total of the Average N	, identify the nent include contractual case, divide	the property securing des taxes or insurance lly due to each Secu- ded by 60. If necess	g the debt, state the A re. The Average Mor red Creditor in the 6	Average Monthly nthly Payment is 0 months	
47		Name of Creditor	Property	Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	
	a.	Deutsche Bank National Tru	Resider	ice	\$ 1,198.59	□ yes 🗹 no	
	b.				\$	☐ yes ☐ no	
	c.				\$	yes no	
				Total: Ad	dd lines a, b and c.		\$ 1,198.59
	resid you i credi cure fored	er payments on secured claims. ence, a motor vehicle, or other p may include in your deduction 1/ itor in addition to the payments li amount would include any sums closure. List and total any such a rate page.	roperty ne 60th of an sted in Li in default	cessary for your sup y amount (the "cure ne 47, in order to ma that must be paid in	port or the support o amount") that you m intain possession of order to avoid repos	f your dependents, nust pay the the property. The ssession or	
48		Name of Creditor		Property Securing	the Debt	1/60th of the Cure Amount	
	a.	Deutsche Bank National Trus	st	Residence		\$ 611.58	
	b.					\$	
	c.					\$	
					Total: Ad	ld lines a, b and c.	\$ 611.58
49	such	nents on prepetition priority cl as priority tax, child support and ruptcy filing. Do not include cu	alimony	claims, for which yo	u were liable at the ti	ime of your	\$
		pter 13 administrative expenses esulting administrative expense.	s. Multiply	y the amount in Line	a by the amount in I	Line b, and enter	
	a.	Projected average monthly Cha	ipter 13 pl	an payment.	\$	150.44	
50	b.	Current multiplier for your dist schedules issued by the Execut Trustees. (This information is a www.usdoj.gov/ust/ or from the court.)	ive Office vailable a	for United States	X	10.0%	
	c.	Average monthly administrative case	e expense	of Chapter 13	Total: Multiply Lir	nes a	\$ 15.04
51	Total	Deductions for Debt Payment. Er	nter the tot	al of Lines 47 throug	gh 50.		\$ 1,825.21
				: Total Deductions			
52	Tota	l of all deductions from income	e. Enter th	e total of Lines 38, 4	6, and 51.		\$ 5,737.68

B22C (Offici	al Form 22C) (Chapter 13) (12/10)			
		Part V. DETERMINATION OF DISPOSABLE INCOME UNDER	2 § 1325(b)(2)		
53	Tota	l current monthly income. Enter the amount from Line 20.		\$	5,873.08
54	disab	port income. Enter the monthly average of any child support payments, foster care payility payments for a dependent child, reported in Part I, that you received in accordance cable nonbankruptcy law, to the extent reasonably necessary to be expended for such	ce with	\$	
55	from	ified retirement deductions. Enter the monthly total of (a) all amounts withheld by wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and ments of loans from retirement plans, as specified in § 362(b)(19).		\$	
56	Tota	l of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.		\$	5,737.68
	Deduction for special circumstances. If there are special circumstances that justify additional expenses for which there is no reasonable alternative, describe the special circumstances and the resulting expenses in lines a-c below. If necessary, list additional entries on a separate page. Total the expenses and enter the total in Line 57. You must provide your case trustee with documentation of these expenses and you must provide a detailed explanation of the special circumstances that make such expenses necessary and reasonable.				
57		Nature of special circumstances	Amount of expense		
	a.		\$		
	b.		\$		
	c.		\$		
		Total: Add I	Lines a, b, and c	\$	
58		l adjustments to determine disposable income. Add the amounts on Lines 54, 55, 5 the result.	66, and 57 and	\$	5,737.68
59	Mon	thly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and en	ter the result.	\$	135.40
		Part VI. ADDITIONAL EXPENSE CLAIMS			
	and w	Expenses. List and describe any monthly expenses, not otherwise stated in this form relfare of you and your family and that you contend should be an additional deduction the under $\S 707(b)(2)(A)(ii)(I)$. If necessary, list additional sources on a separate page monthly expense for each item. Total the expenses.	from your curren	t montl	nly
		Expense Description	Monthly A	mount	
60	a.		\$		
	b.		\$		
	c.		\$		
		Total: Add Lines a, b and	c \$		
		Part VII. VERIFICATION			
		are under penalty of perjury that the information provided in this statement is true and lebtors must sign.)	l correct. (If this a	joint c	ease,
61	Date:	September 19, 2013 Signature: /s/ LYNN D. WRIGHT			
		(Debtor)			